## State of New Hampshire Department of Safety - Division of Safety Services Marine Patrol Bureau

## REPLACEMENT CARD FORM

Please read these directions carefully before completing the form below. If you have questions about this form please contact:

Marine Patrol Boating Education at (603) 293-2645.

- Please print legibly and complete all information on this form.
- There is a \$10.00 fee for your replacement certificate (original card **MUST** be returned with this form).
- Mail to: New Hampshire Marine Patrol Boating Education PO Box 6107 Lakeport NH 03247
- Please do not include any cash with this form by mail. If you wish to make a payment in cash, please deliver the bottom portion of this form in person to our office at 31 Dock Road in Gilford.

Please allow 4-6 weeks for your replacement certificate to arrive by mail.

NameAddress			Phone #	
Date of BirthEye Colo			Height nir Color	
Reas	son for Replacement	<ul><li>☐ Change of Address</li><li>☐ Lost Certificate</li></ul>	<ul><li>□ Name Change</li><li>□ Other (Please Explain)</li></ul>	
Payr	nent Method			
	Check #		Amount \$	
	Money Order #		Amount \$	
	Credit Card #		Amount \$	
	(Expiration Date)			
		OFFICIAL USE O	ONLY	
	Databas	e Updated (	Card Re-issued	